



2022

Janesville Senior Activity Center

Join the JSAC today! Application for Membership

YES, please sign me up for a Renewal or New Membership to the JSAC

☐ Membership Renewal ☐ New Member

If New Member, How did you hear about the JSAC?

☐ Word of Mouth ☐ Newsletter ☐ Newspaper ☐ Radio ☐ Other: _____

☐ Referred by a current member (Tell us who): _____

PLEASE PRINT:

Name: _____ **Date of Birth:** _____

Address: _____ **City/State:** _____

Phone #: _____ **Zip:** _____

Email Address: _____

Emergency Contact Name & Phone #: _____

(Checks make Payable to Janesville Senior Center)

We may release personal information in case of an emergency. We may also use the above information to contact you regarding Senior Center programming and activities.

Signature

Date

We do not release information to telemarketers, solicitors or other Senior Center members.

For Office Staff Only:

Member Since: _____ **Receipt #:** _____ **Staff Initials:** _____ **Date Paid:** _____

Membership Pymt. _____ **Line Dance Pymt.** _____

Method of Payment: ☐ Cash ☐ Check # _____ ☐ Scholarship ☐ Coupon

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